



Attorney Docket No. FOV0002-US (1310-006)

CERTIFICATE OF EXPRESS MAILING UNDER 37 CFR 1.10

Express Mail mailing label number: EV 406623044 US

Applicant: Spalink et al.

TITLE: METHOD AND SYSTEM FOR CLASSIFYING
INFORMATION AVAILABLE ON A COMPUTER
NETWORK

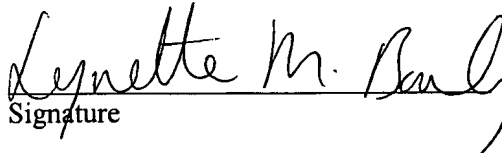
Date of Deposit November 23, 2004

Type of Document(s) Certificate of Express Mailing (1 page);
Transmittal Form;
Fee Transmittal Form (1 page) in duplicate;
Fee Determination Record;
Response and Amendment to Office Action (13 pages);
Request for 1 month extension of time with \$55 fee;
Credit Card Payment Form in the amount of \$99.00
(\$55 extension fee and \$44 additional independent small entity claim fee);
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Return Receipt Postcard.

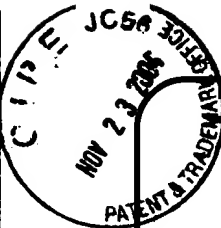
Serial No.: 09/606,683

Filing Date: June 30, 2000

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Signature

Lynette M. Bailey



PTO/SB/21 (6-98)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

20

Application Number

09/606,683 (conf. no.(8443))

Filing Date

June 30, 2000

First Named Inventor

Spalink et al.

Group / Art Unit

2157

Examiner Name

El Chanti, Hussein A.

Attorney Docket No.

FOV0002-US (1310-006)

ENCLOSURES (check all that apply)



Fee Transmittal Form



Fee Attached



Amendment / Response



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement

Certified Copy of Priority
Document(s)Response to Missing Parts/
Incomplete ApplicationResponse to Missing
Parts under 37 CRF
1.52 or 1.53Assignment Papers
(for an Application)

Drawing(s)



Licensing-related Papers

Petition Routing Slip (PTO/SB/69)
and Accompanying PetitionPetition to Convert to a
Provisional ApplicationPower of Attorney, Revocation
Change of Correspondence
Address

Terminal Disclaimer



Small Entity Statement



Request for Refund

After Allowance Communication
to GroupAppeal Communication to Board
of Appeals and InterferencesAppeal Communication to
Group
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Additional Enclosure(s)
(please identify below):Fee Determination Record
Credit Card Payment Form
PTO-2038 for \$99.00
Return Receipt Postcard
Express Mail No.
EV406623044US

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

A. Jose Cortina, Reg. 29,733

Signature

Date

11/23/2004

CERTIFICATE OF MAILING

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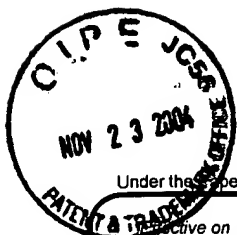
Typed or printed name

Lynette M. Bailey

Signature

Date

11/23/2004



PTO/SB/17 (11-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 99.00**Complete if Known**

Application Number	09/606,683
Filing Date	June 30, 2000
First Named Inventor	Spalink et al.
Examiner Name	El Chanti, Hussein A.
Art Unit	2157
Attorney Docket No.	FOV0002-US (1310-006)

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order☐ Deposit Account ☐ NoneDeposit Account Number _____
Deposit Account Name _____

The Director is hereby authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below
- ☐ Charge fee(s) indicated below, **except for the filing fee**
- ☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
- ☐ Credit any overpayments

to the above-identified deposit account.

☐ Other (please identify): _____**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING FEE**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	_____
Design Filing Fee	350	175	_____
Plant Filing Fee	550	275	_____
Reissue Filing Fee	790	395	_____
Provisional Filing Fee	160	80	_____
Subtotal (1)	\$ 0.00		

FEE CALCULATION (continued)**2. EXTRA CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ - 20 or HP = _____ x _____ = _____			
HP = highest number of total claims paid for, if greater than 20			

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ - 3 or HP = _____ x _____ = <u>44.00</u>			
HP = highest number of independent claims paid for, if greater than 3			

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

Subtotal (2) \$ 44.00**3. OTHER FEES**

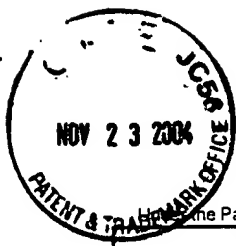
Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
1-month extension of time	110	55	55.00
2-month extension of time	430	215	_____
3-month extension of time	980	490	_____
4-month extension of time	1,530	765	_____
5-month extension of time	2,080	1,040	_____
Information disclosure stmt. fee	180	180	_____
37 CFR 1.17(q) processing fee	50	50	_____
Non-English specification	130	130	_____
Notice of Appeal	340	170	_____
Filing a brief in support of appeal	340	170	_____
Request for oral hearing	300	150	_____
Other: _____			

Subtotal (3) \$ 99.00**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	29,733	Telephone (919) 544 5444
Name (Print/Type)	A. Jose Cortina	Date	November 23, 2004	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

09/606,683**CLAIMS AS FILED – PART I**

(Column 1)

(Column 2)

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	14 minus 20 =	0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$ _____
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	
TOTAL	

OR

OR

OR

OR

OR

OR

RATE	FEE
	\$ _____
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	8	Minus	20	= 0
	Independent (37 CFR 1.16(b))	2	Minus	3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	14	Minus	20	= 0
	Independent (37 CFR 1.16(b))	2	Minus	3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$ _____ =	0
x \$ _____ =	0
+ \$ _____ =	
TOTAL ADD'L FEE	0

OR

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	17	Minus	20	= 0
	Independent (37 CFR 1.16(b))	4	Minus	3	= 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x \$ 44 =	44.00
+ \$ _____ =	
TOTAL ADD'L FEE	44.00

OR

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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